

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

RECEIVED Date Stamp JUL 29 2002 City Clerk City of Lodi	CALIFORNIA FORM 501
	For Official Use Only

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) <u>Pennino Phillip A</u>	DAYTIME TELEPHONE NUMBER <u>(209) 368-2181</u>	FAX NUMBER (optional) <u>(209) 368-2181</u>	E-MAIL (optional) <u>Pennino@Lodi.Gov</u>
STREET ADDRESS <u>1502 Keach Way</u>	CITY <u>Lodi</u>	STATE <u>CA</u>	ZIP CODE <u>95242</u>
OFFICE SOUGHT (POSITION TITLE) <u>Lodi City Council</u>	AGENCY NAME <u>City of Lodi</u>	DISTRICT NUMBER, if applicable. <u>CA</u>	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: <u>City of Lodi</u>	(Name of Jurisdiction)		
Year of Election: <u>2002</u> (Year of Election)			

2. State Candidate Expenditure Limit Statement:

(Candidates for statewide office are not required to complete Part 2 until 11/6/02. CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

(Year of Election) 2002 Primary/general election (Year of Election) 2002 Special/runoff election

(Check one box)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on: ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

☐ On ____/____/____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

Voluntary Expenditure Ceilings:

(Gov. Code Section 85400)

Office	Primary or Special	General or Special Run-off
(Effective 1/1/01)		
Assembly	\$400,000	\$700,000
Senate	\$600,000	\$900,000
(Effective 11/6/02)		
Board of Equalization	\$1,000,000	\$1,500,000
Governor	\$6,000,000	\$10,000,000
Lieutenant Governor, Attorney General, Insurance Commissioner, Controller, Secretary of State, Supt. of Public Instruction, Treasurer	\$4,000,000	\$6,000,000

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/27/02
(month, day, year)

Signature Phillip Pennino
(Candidate)